

EXHIBIT 6

From: Walji, Zenobia [ETHUS]
Sent: Tue, 07 Sep 2004 13:50:29 GMT
To: Bonet, Giselle [ETHUS] <GBonet3@its.jnj.com>; Bell, Steve [ETHIT] <SBell6@ethit.JNJ.com>
CC: Mahar, Kevin [ETHUS] <KMahar@its.jnj.com>; Breznak, Mike [ETHUS] <MBREZNAK@ETHUS.JNJ.com>
Subject: FW: Pelvic Floor Monthly - August Report - Next Gen Materials Progress

Dear Giselle (and Steve),

(SENSITIVE AND CONFIDENTIAL INFORMATION - Please do not share with anyone without discussing with me first)

Ronnie, Gene and I have had several meetings with CBAT (Center for Biomaterials and Advanced Technology group) to review their lab learnings from investigating several composite materials and therefore provide some direction for a Next Gen Pelvic Floor Material:

- A) GYNEMESH PS + Bovine Collagen/Gag Matrix (Integra = Advanced Wound Care product used for Burns patients)
- B) GYNEMESH PS + Proceed (Interceed + PDS - FYI this is a composite mesh released by EPD)
- C) GYNEMESH PS + Europa (35% PCL, 65% PGA = CBAT material)

The key insights related to orientation of the collagen fibrils and therefore characteristics that could positively improve/reduce tissue contraction around the mesh. GYNEMESH PS today has a "swirling effect" causing what doctors have expressed as "shrinkage or contraction of the mesh". It isn't the mesh that's contracting, its the tissue that seems to be "bunching" up resulting in the desire to have a more "tension-free" fixation. Bottom line, if you have collagen trails in ONE Direction, it is likely to cause MORE contraction. Therefore, collagen trails that are multidirectional/more random may be BETTER to reduce contraction.

While this is good learning, there are many more things that would need to be tested and understood before we could finalize our Next Gen Concepts. We would also need to PRIORITIZE which attributes are critical so that these considerations can be understood for the "ideal" product. (For example: beyond tissue contraction, understanding what happens to the TENSILE strength of the tissue over the matrix, (scars are weaker than normal tissue), so less inflammatory response, less scarring is BETTER, but what is MORE important - strength or minimal contraction?)

Here are some next steps:

- 1) With the new CBAT funding model for 2005, GYNECARE would have to pay for the FTE time at CBAT - Ronnie and CBAT have to work out what can be afforded. At this stage the cost is an issue as it would represent 50-60% of Ronnie's current Exploratory R&D Budget.
- 2) CBAT has proposed studying two matrix configurations in parallel (A and C above. We might have to end up picking only one, or negotiating overall study costs to do both)

I am sharing this with you for three reasons:

- 1) As you continue your learning and development in Pelvic Floor, you need to be able to articulate which attributes for an ideal mesh are important and in what rank order
- 2) You need to have a good understanding of how to effectively combat the competitive "noise" regarding

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materials. Towards this end, there is a lot of good data that was generated by CBAT when GYNEMESH PS was being developed (Paul Parisi was leading), unfortunately, none of it was published, though it can be. Kelly Brown and Mora Melican are willing to discuss what is available, including the data from comparing various competitive materials. Kelly said she would be setting up time with you to discuss. I am happy to join you to help guide you through this. Steve, if you are going to be in the US in the near future, perhaps the meeting can be planned to include you. Please advise.

FYI, here is some important info I shared with the group regarding the "market-place" to get you started. We can meet to discuss this further...

3) I realize the US Pipeline person has still not been hired and I will do what I can, but it's important that you and Steve are aware of this effort and gain alignment on what's needed. I know Laura as a BOARD Sponsor for Pelvic Floor is aware of this effort, but I think it's important that you are too.

Any questions, let me know.

Zenobia Walji
Director, Strategic Marketing
GYNECARE WORLDWIDE
Tel - 908-218-2647
Fax - 908-218-3146
e-mail - zwajji2@ethus.jnj.com

-----Original Message-----

From: Brown, Kelly [ETHUS]
Sent: Friday, September 03, 2004 3:04 PM
To: Andrea Calvani [ETHUS] (E-mail); Chagnon, Madeleine [ETHUS]; Chunlin Yang [ETUS] (E-mail); Kammerer, Gene [ETHUS]; Mora [ETHUS] Melican (E-mail)
Cc: Vyakarnam, Murty [ETHUS]; Toddywala, Ronnie [ETHUS]; Walji, Zenobia [ETHUS]
Subject: Pelvic Floor Monthly - August

To everyone,

Please find attached the monthly report for August which includes a few notes from yesterday's meeting. I would like to thank everyone again for coming. I felt that the meeting was quite educational with regards to the needs in pelvic floor repair. Zenobia, I would like to thank you again for sharing that information with us.

Have a wonderful labor day weekend,
Kelly

Kelly Brown, Ph.D.
Senior Scientist
Center for Biomaterials
and Advanced Technologies
Medical Devices Group
a division of Ethicon
Route 22 West, P.O. Box 151

Somerville, NJ 08876-0151
(908) 218-2620
(908) 218-3679 (fax)

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